2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000014438

Entity Name: COLE PARTNERS LLC

Current Principal Place of Business:

80 WATER OAKS WAY NAPLES, FL 34103

Current Mailing Address:

819 CHATHAM ROAD GLENVIEW. IL 60025

FEI Number: 45-2267518 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TILGHMAN, RICHARD HIII 80 WATER OAKS WAY NAPLES, FL 34103 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Mar 09, 2014

Secretary of State

CC5995419015

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name CARRIGAN, JOHN AIII Name CARRIGAN, MARY K

Address 2451 S. PONTE VEDRA BLVD. Address 2777 GULF SHORE BLVD. NORTH

UNIT 6W

City-State-Zip: PONTE VEDRA BEACH FL 33082

City-State-Zip: NAPLES FL 34103

Title MGRM

Name

Title MGRM
TILGHMAN, PATRICIA C

Name COLLINS, KATHRYN F
Address 819 CHATHAM ROAD

Address 6536 1ST AVE. NW

City-State-Zip: GLENVIEW IL 60025

City-State-Zip: SEATTLE WA 98117

Title MGRM Title MGRM

Name CARRIGAN, MARY E Name WEEMS, FRED T

Address E. 2354 ALPINE LANE

City-State-Zip: LAVALLE WI 53941

Address 11042 BIG CANOE

City-State-Zip: LAVALLE WI 53941

City-State Zip: LASPER CA 20143

y-State-Zip: LAVALLE WI 53941 City-State-Zip: JASPER GA 30143

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATRICIA TILGHMAN

03/09/2014